

Joint Legislative and Executive Task Force on Mental Health Service Delivery and Financing

OBJECTIVE	WORK TO BE COMPLETED	TASK FORCE REVIEW & ACTION	RELATED ACTIVITIES PLANNED OR UNDERWAY
1 ISSUE AREA: Services and Funding for Persons NOT Enrolled in Medicaid.			
ESTABLISH BACKGROUND AND CONTEXT	Research and summarize for the Task Force: <ul style="list-style-type: none"> • Statutory requirements on eligibility for MH services. • Medicaid requirements on eligibility for MH services. • Medicaid eligibility: who is and who is not. • Historical trends in Medicaid vs. non-Medicaid funding of community MH services. • Medicaid managed care and state-only funding. • New federal requirements on Medicaid managed care. • Impacts and implications for Washington. 	July 2004 Meeting	Joint DSHS/RSN/Provider Work Group established to understand new federal rules, their impacts, and how to respond.
DEFINE KEY CHARACTERISTICS OF NON-MEDICAID CONSUMERS	Research and report to the Task Force on non-medicaid consumers: <ul style="list-style-type: none"> • MH service utilization, compared to Medicaid consumers, by age, sex, race, & priority status. • MH service utilization by age and priority status, by RSN. • Criminal justice system use by priority status and RSN. • State-subsidized medical costs by priority status and RSN. • Child welfare use by priority status and RSN. • Perceived gaps, estimated unmet needs, in current service levels by RSN. 	August 2004 Meeting September 2004 Meeting	FY 03 service hours by RSN and priority status already assembled by MHD; DSHS assembling data to support request for additional state-only funding. Joint MHD/RSN/Provider Work Group established to review and identify non-Medicaid costs as part of actuary study that will be used to set FY 06-08 Medicaid rates.

OBJECTIVE	WORK TO BE COMPLETED	TASK FORCE REVIEW & ACTION	RELATED ACTIVITIES PLANNED OR UNDERWAY
IDENTIFY OPTIONS FOR MODIFYING SERVICES AND/OR STATE FUNDING LEVELS IN RESPONSE TO FEDERAL FUNDING REDUCTION	<ul style="list-style-type: none"> • Suggest possible implications of research. • Identify initial set of options for additional consideration. • Submit more fully refined set of options for additional consideration. 	September 2004 Meeting September 2004 Meeting October 2004 Meeting	<ul style="list-style-type: none"> • Priorities of Government Team on Vulnerable Children and Adults developing options? • Joint DSHS/RSN/Provider Work Group established to develop options such as reducing services, access, and requirements; and increasing funding.
ASSESS OPTIONS	<ul style="list-style-type: none"> • Suggest potential pros and cons of identified options. • Organize 2 - 4 public hearings to collect stakeholder feedback and suggestions. 	October 2004 Meeting November 2004	Priorities of Government Results Team on Vulnerable Children and Adults to propose key changes, savings, and innovations October 29, for Governor's budget.
FINDINGS AND RECOMMENDATIONS	Prepare draft finding and recommendations for Task Force consideration, including suggestions for additional work to be completed by June 2005.	December 2004 Meeting	Governor Locke's recommended 2005 Supplemental and 2005-07 Operating budgets submitted by December 20.

OBJECTIVE	WORK TO BE COMPLETED	TASK FORCE REVIEW & ACTION	RELATED ACTIVITIES PLANNED OR UNDERWAY
2 ISSUE AREA: Types, numbers, and locations of inpatient psychiatric hospital and community residential beds in both the private and public sector.			
ESTABLISH BACKGROUND AND CONTEXT	<ul style="list-style-type: none"> • Identify and summarize significant background components. • Define inpatient psychiatric clients. • Identify other interested parties or systems. • Discuss legal requirements, recent case law legislation and potential impacts on bed capacity. 	July Meeting	<ul style="list-style-type: none"> • Public Consulting Group Report (PCG) 2002 (study of residential and inpatient needs for adults served by MH system). • Community Based Care Plan and Expanded Community Services under the auspices of the Mental Health Division. • MHD study of residential and inpatient needs for supporting community service capacity. To be completed by December 2004, per operating budget proviso. • Western State Hospital decertification for DD/Geriatric inpatient units by federal order. • Cross-system Crisis Response Task Force. • JRA/MHD/CA workgroup on children's mental health.

OBJECTIVE	WORK TO BE COMPLETED	TASK FORCE REVIEW & ACTION	RELATED ACTIVITIES PLANNED OR UNDERWAY
IDENTIFY CURRENT TYPES, NUMBERS, AND LOCATIONS OF BEDS	<ul style="list-style-type: none"> • Report on the utilization rates of beds at all levels and locations across the state. Summarize current state hospital and community residential capacity and utilization; current bed capacities for RSN adult consumers, children, and non-RSN consumers. • Identify current expenditures, and funding sources. • Describe relationship between community hospital and residential beds and state hospital beds. • List types, names and locations of public and private facilities and numbers of available beds, both public and privately funded. 	August meeting.	See above.
IDENTIFY NEEDS FOR PSYCHIATRIC BEDS	<ul style="list-style-type: none"> • Review research and report on studies in Washington, national literature. • Define appropriate use of state hospital beds. • Discuss siting process and difficulties in siting new facilities. • Examine issues relating to availability, access and utilization of children and adolescents: • Research whether clients (adult and/or minors) go out of state for mental health services; what types of out-of-state facilities are used, at what cost. • Assess the adequacy of the number of professionals needed to staff psychiatric beds across the state. 	Preliminary discussions in September.	See above.

OBJECTIVE	WORK TO BE COMPLETED	TASK FORCE REVIEW & ACTION	RELATED ACTIVITIES PLANNED OR UNDERWAY
	<ul style="list-style-type: none"> • Discuss rate and funding structure impacts on availability or loss of psychiatric beds and units. • Discuss impact of Federal Medicaid changes. • Examine funding of Children/Adolescent inpatient services, both children in the system and outside the system. • Compare costs of hospital vs. residential and community beds. • Analyze state hospital funding needs in light of recent legislation. • Present current data on cost of treatment vs. clinical effectiveness of various types of beds (inpatient hospital vs. residential, state vs. community beds). • Outline historical trends in Washington regarding bed creation, availability and utilization. 		
ASSESS OPTIONS	<ul style="list-style-type: none"> • Identify options for types, location, funding of children, adult, and forensic beds. • Suggest potential pros and cons of identified options. • Organize 2-4 public hearings to collect stakeholder feedback and suggestions. 	Preliminary discussions in October.	
FINDINGS AND RECOMMENDATIONS	Prepare draft findings and recommendations for Task Force consideration.	Preliminary discussions in November.	

OBJECTIVE	WORK TO BE COMPLETED	TASK FORCE REVIEW & ACTION	RELATED ACTIVITIES PLANNED OR UNDERWAY
3 ISSUE AREA: Extent to which current funding distribution methodology achieves equity in funding and access to services for MH services consumers.			
ESTABLISH BACKGROUND AND CONTEXT	Reseach and summarize for the Task Force: <ul style="list-style-type: none"> • Existing MH resources (i.e. Medicaid-matched, non-Medicaid, state hospital beds, other??). • Current distribution methodology for each type of resource and the necessity of the use of a proxy. • Sum up recent changes to this methodology. • Relationship to statutory and Medicaid requirements, including changing Medicaid environment. • What does this mean to the consumer in various areas of the state? 	August 2004 Meeting	
DEFINE THE QUESTION	Are we using the best and most appropriate proxies available to distribute resources? Do we need to propose any modifications to the current system in order to make the system more equitable?		
IDENTIFY OPTIONS FOR MODIFYING CURRENT FUNDING DISTRIBUTION METHODOLOGY	Suggest possible implications of research. Identify initial set of options for additional consideration. Submit more fully refined set of options for additional consideration.		
ASSESS OPTIONS	Suggest potential pro's and con's of identified options. Organize public hearings to collect stakeholder feedback and suggestions.		Will tie into the non-Medicaid eligible workgroup.

OBJECTIVE	WORK TO BE COMPLETED	TASK FORCE REVIEW & ACTION	RELATED ACTIVITIES PLANNED OR UNDERWAY
FINDINGS AND RECOMMENDATIONS	Prepare draft findings and recommendations for Task Force consideration.		

OBJECTIVE	WORK TO BE COMPLETED	TASK FORCE REVIEW & ACTION	RELATED ACTIVITIES PLANNED OR UNDERWAY
4 ISSUE AREA: Administrative structure of the community MH system as it relates to effectively meeting the goals established in statute.			
ESTABLISH BACKGROUND AND CONTEXT	Review current statutory and mental health waiver requirements.	July 2004 Meeting	
REVIEW CURRENT RSN STRUCTURE AND COMPARE TO APPROACHES IN OTHER STATES	Define current mental health structure, including chapter 71.24 RCW driven county choice.	October 2004 Meeting	
IDENTIFY OPTIONS FOR MODIFYING CURRENT ADMINISTRATIVE STRUCTURE	Identify options to achieve the greatest efficiencies while achieving the current statutory goals under two service delivery models: fee-for-service and managed care. Include in the analysis consideration of the federal balanced budget act changes, economy of scale trade-offs with local controls, and non-Medicaid client service strategies.		
ASSESS OPTIONS	Suggest potential pros and cons of identified options.		
FINDINGS AND RECOMMENDATIONS	Prepare draft findings and recommendations for Task Force consideration.	June 2005 Meeting	

OBJECTIVE	WORK TO BE COMPLETED	TASK FORCE REVIEW & ACTION	RELATED ACTIVITIES PLANNED OR UNDERWAY
5 ISSUE AREA: Most effective and efficient MH funding and payment models (including capitated managed care), in light of requirements of the federal balanced budget act of 1997 related to state Medicaid managed care contracting.			
ESTABLISH BACKGROUND AND CONTEXT	<ul style="list-style-type: none"> Review the MHD 1995 Prepaid Health Plan waiver for serving Medicaid clients through RSN. Review the Balanced Budget Act of 1997 and it's effect on Medicaid managed care contracting. Review current federal BBA managed care requirements. 	July 2004 Meeting	MHD has begun a comparison of fee-for-service vs. managed care.
EXAMINE STRENGTHS AND WEAKNESSES OF FEE FOR SERVICE AND MANAGED CARE FINANCING SCHEMES	Develop a matrix of strengths and weaknesses of fee for service approaches compared to managed care systems		
IDENTIFY OPTIONS FOR MODIFYING FINANCING SCHEME FOR COMMUNITY-BASED MENTAL HEALTH CARE	<ul style="list-style-type: none"> Research approaches taken in other States for financing and delivering mental health services Develop options for the task force to consider looking at variations of a fee for service system, as well as maintaining a managed care approach 	October 2004 Meeting	
ASSESS OPTIONS	Suggest potential pros and cons of identified options.		
FINDINGS AND RECOMMENDATIONS	Prepare draft finding and recommendations for Task Force consideration.	June 2005 Meeting	

OBJECTIVE	WORK TO BE COMPLETED	TASK FORCE REVIEW & ACTION	RELATED ACTIVITIES PLANNED OR UNDERWAY
6 & 7 ISSUE AREA: Implementation by DSHS and RSNs performance-based measurement system focusing on outcomes for consumers served by MH systems and reduction of duplicative and burdensome administrative and oversight requirements.			
ESTABLISH BACKGROUND AND CONTEXT	Staff and MHD presentation on JLARC audit and follow-up, RCW requirements, and federal requirements under the federal Waiver	January 2005 Meeting.	JLARC Audit, State Statutory requirements, and CMS standards under the federal Waiver.
REVIEW CURRENT ACTIVITIES	Coordinate presentation by the MHD, contractor responsible for the Outcomes project, and comment from RSNs and Providers		MHD's Consumer Outcome Project, MIS study required by CMS protocol, RSN contractual changes, Deeming, pilot project on combining reviews.
IDENTIFY OPTIONS FOR IMPROVING PERFORMANCE-BASED MEASUREMENT SYSTEM AND REDUCING ADMINISTRATIVE AND OVERSIGHT REQUIREMENTS	<ul style="list-style-type: none"> • Identify options for additional consideration. • Possible survey of RSNs to identify improvements, problems, and suggestions for future actions. 		
ASSESS OPTIONS	Suggest potential pros and cons of identified options.		
FINDINGS AND RECOMMENDATIONS	<ul style="list-style-type: none"> • Prepare draft finding and recommendations for Task Force consideration. 	June 2005 Meeting	

MHTF
6-10-04